



JOSEPH KELLY
TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

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November 17, 2015


The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

14 November 17, 2015


PATRICK O'QUINN
ACTING EXECUTIVE OFFICER

REQUEST TO ACCEPT COMPROMISE OFFERS OF SETTLEMENT (ALL SUPERVISORIAL DISTRICTS AFFECTED) (3 VOTES)

SUBJECT

This is to request Board approval to accept compromise offers of settlement for patients who were injured in a third party compensatory accident and received medical care at a County facility. Treasurer and Tax Collector (TTC) staff entered into negotiations with the liable parties and reached the following settlement agreements which are beyond the TTC's authority.

IT IS RECOMMENDED THAT THE BOARD:

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the following compromise offers of settlement:

1. Account Number 12817167 in the amount of \$ 4,600.00
2. Account Number 12719385 in the amount of \$ 3,799.79
3. Account Number 12666394 in the amount of \$ 7,769.32
4. Account Number 12896803 in the amount of \$12,832.00
5. Account Number 12786623 in the amount of \$74,842.41
6. Account Number 12816492 in the amount of \$45,974.47
7. Account Number 12923927 in the amount of \$11,140.00
8. Account Number 12943197 in the amount of \$ 4,650.00

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

These compromise offers of settlement are recommended because the subject patients are unable

to pay the full amount of charges and the compromise offers represent the maximum amount the Department was able to negotiate or was offered under the legal settlement requirements involved in these cases.

The best interest of the County would be served by authorizing acceptance of these compromise offers of settlement, as they will ensure maximum possible collection on these accounts.

Implementation of Strategic Plan Goals

The recommended action supports Goal 1, Operational Effectiveness/Fiscal Sustainability, of the County's Strategic Plan by collecting funds owed to the County.

FISCAL IMPACT/FINANCING

Authorizing acceptance of these compromise offers of settlement will enable the County to maximize collections on these accounts.

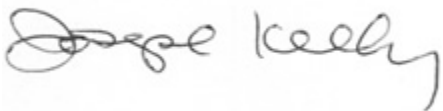
FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Under County Code Title 2, Division 3, Chapter 2.52.040 (L), the TTC has the authority to reduce patient account liabilities by the greater of: (i) \$15,000, or (ii) \$75,000 or 50 percent of the account balance, whichever is less. Any reduction exceeding this authority requires Board approval. These account reductions exceed this authority.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Authorizing acceptance of these compromise offers of settlement will result in net revenues for the County, which will in turn assist the County in meeting its fiscal responsibilities.

Respectfully submitted,



Joseph Kelly

Treasurer and Tax Collector

JK:KK:KG:BR:ms

Enclosures

c: Chief Executive Officer
Acting Executive Officer, Board of Supervisors

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136A

Amount of Aid	\$24,511.00	Account Number	12817167
Amount Paid	0.00	Name	Adult Male
Balance Due	\$24,511.00	Service Date	09/28/13 - 04/21/14
Compromise Amount Offered	4,600.00	Facility	Harbor UCLA Medical Center
Amount to be Written Off	\$19,911.00	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. He was treated at Harbor UCLA Medical Center at a cost of \$24,511.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 5,000.00	33.33%
Attorney Costs	652.11	652.11	4.35%
County of Los Angeles	24,511.00	4,600.00	30.67%
Gerber Ambulance	1,164.25	200.00	1.33%
Torrance Fire Department	524.00	100.00	0.67%
Net to Client	N/A	4,447.89	29.65%
Total	\$31,851.36	\$15,000.00	100.00%

Our financial investigation reveals that the client is unemployed and is receiving unemployment benefits. The client has no other source of income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136B

Amount of Aid	\$52,070.00	Account Number	12719385
Amount Paid	0.00	Name	Adult Female
Balance Due	\$52,070.00	Service Date	06/09/12 – 10/04/12
Compromise Amount Offered	3,799.79	Facility	Harbor UCLA Medical Center
Amount to be Written Off	\$48,270.21	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. She was treated at Harbor UCLA Medical Center at a cost of \$52,070.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 5,000.00	33.33%
Attorney Costs	187.90	187.90	1.25%
Antelope Valley Hospital	12,885.40	940.57	6.27%
County of Los Angeles	52,070.00	3,799.79	25.33%
Emergency Medical Services Corporation	833.00	61.23	0.41%
Renaissance Imaging	1,864.00	136.28	0.91%
Net to Client	N/A	4,874.23	32.50%
Total	\$72,840.30	\$15,000.00	100.00%

Our financial investigation reveals that the client is unemployed and is supported financially by her family. The client has no other source of income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136C

Amount of Aid	\$36,639.00	Account Number	12666394
Amount Paid	0.00	Name	Adult Male
Balance Due	\$36,639.00	Service Date	02/15/12 – 06/08/12
Compromise Amount Offered	7,769.32	Facility	Harbor UCLA Medical Center
Amount to be Written Off	\$28,869.68	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in a bicycle versus pedestrian accident. He was treated at Harbor UCLA Medical Center at a cost of \$36,639.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$45,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$13,748.59	\$13,748.59	30.55%
Attorney Costs	3,754.24	3,754.24	8.34%
California Imaging Network	8,490.00	1,787.32	3.97%
California Orthopedic Institute	14,384.40	3,164.57	7.03%
County of Los Angeles	36,639.00	7,769.32	17.27%
County of Los Angeles Fire Department	1,236.50	272.57	0.61%
St. Francis Medical Center	4,078.50	824.92	1.83%
Net to Client	N/A	13,678.47	30.40%
Total	\$82,331.23	\$45,000.00	100.00%

Our financial investigation reveals that the client is unemployed. The client has no income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136D

Amount of Aid	\$61,268.00	Account Number	12896803
Amount Paid	0.00	Name	Adult Female
Balance Due	\$61,268.00	Service Date	06/29/14 – 07/08/14
Compromise Amount Offered	12,832.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$48,436.00	Service Type	Inpatient

JUSTIFICATION

The client was involved in an automobile versus pedestrian accident. She was treated at LAC USC Medical Center at a cost of \$61,268.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$50,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$16,666.00	\$16,666.00	33.34%
Attorney Costs	355.00	355.00	0.71%
Allan Wong, D.C., LAc	5,250.00	3,000.00	6.00%
Angelica Kuo, M.D., D.C.	7,500.00	5,000.00	10.00%
County of Los Angeles	61,268.00	12,832.00	25.66%
David Johnson, M.D.	800.00	500.00	1.00%
Ventura Imaging Center	4,200.00	2,000.00	4.00%
Net to Client	N/A	9,647.00	19.29%
Total	\$96,039.00	\$50,000.00	100.00%

Our financial investigation reveals that the client is unemployed and is supported financially by her family. The client has no other source of income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136E

Amount of Aid	\$187,346.00	Account Number	12786623
Amount Paid	0.00	Name	Adult Male
Balance Due	\$187,346.00	Service Date	04/06/12 – 07/13/12
Compromise Amount Offered	74,842.41	Facility	LAC USC Medical Center
Amount to be Written Off	\$112,503.59	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$187,346.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$300,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$120,000.00	\$120,000.00	40.00%
Attorney Costs	2,100.00	2,100.00	0.70%
County of Los Angeles	187,346.00	74,842.41	24.95%
County of Los Angeles Fire Department	3,880.00	3,880.00	1.29%
Dr. Ali A. Dini, MD	1,350.00	700.00	0.23%
Dr. Jon Greenfield, Orthopedic Surgeon	7,300.00	5,000.00	1.67%
Glendale Memorial Hospital	1,350.00	900.00	0.30%
Global Physiological Service Inc.	22,538.00	15,592.00	5.20%
Green Cross Health Center	11,110.00	7,210.00	2.40%
Vermont Urgency Chiropractic Clinic	13,720.00	8,000.00	2.67%
Net to Client	N/A	61,775.59	20.59%
Total	\$370,694.00	\$300,000.00	100.00%

Our financial investigation reveals that the client performs odd jobs and supports himself financially with a marginal income. The client has no other source of income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL 136F

Amount of Aid	\$332,753.00	Account Number	12816492
Amount Paid	0.00	Name	Adult Male
Balance Due	\$332,753.00	Service Date	09/28/12 – 05/12/13
Compromise Amount Offered	45,974.47	Facility	LAC USC Medical Center
Amount to be Written Off	\$286,778.53	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in a tractor-trailer versus motorcycle accident. He was treated at LAC USC Medical Center at a cost of \$332,753.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$250,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 83,325.00	\$ 83,325.00	33.33%
Attorney Costs	63,566.61	63,566.61	25.43%
California Emergency Physicians Medical Group	1,336.00	500.00	0.20%
Care Ambulance Service	1,851.85	1,000.00	0.40%
City of Los Angeles Fire Department	1,898.00	1,500.00	0.60%
County of Los Angeles	332,753.00	45,974.47	18.39%
Doctor's Ambulance Service	1,248.74	400.00	0.16%
Gary Chen, M.D.	7,854.00	1,500.00	0.60%
Roger Light, M.D.	4,000.00	1,700.00	0.68%
Ronald Fisk, P.H.D.	8,650.00	2,500.00	1.00%
Saddleback Memorial Hospital	87,567.27	17,000.00	6.80%
South Coast Radiological Medical Group	1,234.00	400.00	0.16%
Net to Client	N/A	30,633.92	12.25%
Total	\$595,284.47	\$250,000.00	100.00%

In preparation for trial, the attorney incurred expert fees and costs which assisted him in reaching a settlement. Legal costs could have been much higher if the case had gone to trial. After the attorney fees and costs, 41.24 percent of the settlement was available. Our financial investigation reveals that the client is unemployed and is supported financially by his family. The client has no other source of income or tangible assets.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR
TRANSMITTAL 136G

Amount of Aid	\$30,749.00	Account Number	12923927
Amount Paid	0.00	Name	Adult Male
Balance Due	\$30,749.00	Service Date	03/05/12 – 07/25/12
Compromise Amount Offered	11,140.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$19,609.00	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus motorcycle accident. He was treated at LAC USC Medical Center at a cost of \$30,749.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$50,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$20,000.00	\$20,000.00	40.00%
Attorney Costs	823.24	823.24	1.65%
Arthur Kreitenberg, M.D.	1,920.00	696.67	1.39%
City of Los Angeles Fire Department	1,404.50	509.80	1.02%
County of Los Angeles	30,749.00	11,140.00	22.28%
Hollywood Presbyterian Medical Center	11,174.20	4,048.89	8.10%
Net to Client	N/A	12,781.40	25.56%
Total	\$66,070.94	\$50,000.00	100.00%

Our financial investigation reveals that the client is self-employed and financially supports himself with a marginal income. The client has no other source of income.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR
TRANSMITTAL 136H

Amount of Aid	\$20,594.00	Account Number	12943197
Amount Paid	0.00	Name	Adult Male
Balance Due	\$20,594.00	Service Date	11/29/14 – 01/20/15
Compromise Amount Offered	4,650.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$15,944.00	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus skate boarder accident. He was treated at LAC USC Medical Center at a cost of \$20,594.00. The client did not have Medi-Cal or private insurance.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 5,000.00	33.33%
Attorney Costs	0.00	0.00	0.00%
City of Los Angeles Fire Department	300.00	100.00	0.67%
County of Los Angeles	20,594.00	4,650.00	31.00%
Rawlings Company	1,167.50	250.00	1.67%
Net to Client	N/A	5,000.00	33.33%
Total	\$27,061.50	\$15,000.00	100.00%

Our financial investigation reveals that the client supports himself with a marginal income. The client has no other source of income or tangible assets.